# UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF MASSACHUSETTS

In re ANDREW GREENHUT, Debtor IN PROCEEDINGS UNDER CHAPTER 13 CASE NO.: 19-10782

# MOTION OF DEBTOR TO AMEND SUMMARY OF SCHEDULES, SCHEDULES "I" AND "J", STATEMENT OF CURRENT MONTHLY INCOME AND CHAPTER 13 CALCULATION OF NET DISPOSABLE INCOME AND FORM 106DEC

NOW COMES, the Debtor, Andrew Greenhut, and hereby moves this Honorable, pursuant to Fed. R. Bankr. Pro. 1009(a) and MLBR 1009-1(a), for an Order permitting the Debtor to amend his Summary of Schedules, Schedules "I" and "J", Statement of Current Monthly Income and Chapter 13 Calculation of Net Disposable Income and Form 106Dec. As grounds therefor, the Debtor states as follows:

- Contemporaneously with the filing of this Motion, the Debtor has filed a Third Amended Chapter 13 Plan and Motion to Approve the Amendment of the same.
- 2. The Debtor's Amended Summary of Schedules, Amended Schedules "I" and "J", Statement of Current Monthly Income and Chapter 13 Calculation of Net Disposable Income and Amended Form 106Dec are attached hereto as Exhibit "A".
- 3. The Amendment of both the Plan and the Schedules referred to herein are occasioned by the recent decision of the Texas Supreme Court ruling in favor of the Creditor Gita Srivastava and the Debtor's decision not to ,pursue and further appeals of the same. Additionally, the Debtor has been informed by his partner and fiancée that she is expecting their first child due in December of 2020.

- 4. These events represent a substantial change in the Debtor's financial and legal circumstances and necessitate the filing of an Amended Schedules of Income and Expenses and the submission of a Second Amended Chapter 13 Plan.
- 5. Because the Debtor's Plan, income and expenses have been the focus of repeated criticisms by the Creditor, Gita Srivastava, the Debtor, out of genuine desire of transparency and candor towards both this Court and the Chapter 13 Trustee, the Debtor felt it necessary not only to amend his Schedules of present income and expenses as expressed on his Schedules "I" and "J", but to also amend his Statement of Current Monthly Income and Chapter 13 Calculation of Net Disposable Income (i.e. Form 122C-1 and C-2) which reflects the Debtor's Income and Expenses during the period for the six-month period prior to the Debtor's Chapter 13 filing. Additionally, the Debtor has included in the Amended Schedules and "I" and "J" and the Amended Statement of Current Monthly Income and Chapter 13 Calculation of Net Disposable Income, the income and expenses of the Debtor fiancée and treated the same as a household of three (3), as the couple are expecting their first child in December of this year.
- 6. Furthermore, before submitting these amended documents to the Court, the Debtor has submitted them to the Chapter 13 Trustee for her review, along with the underlying paystubs of the Debtor and his fiancée for the present timeframes implicated by the Amended Schedules and "I" and "J" and the past timeframe represented Amended Statement of Current Monthly Income and Chapter 13 Calculation of Net Disposable Income, along with a confidential signed written statement from the Debtor's fiancée, concerning her intentions to return to work after giving birth, her income and her personal expenses. This was done at the request of the Chapter 13 Trustee and in order to allay the concerns raised by the Chapter 13

Case 19-10782 Doc 206 Filed 08/05/20 Entered 08/05/20 10:46:45 Desc Main Document Page 3 of 24

Trustee reflected in her Response to the Debtor's Second Amended Chapter 13 Plan

regarding the Net Disposable Income analysis under 11 U.S.C. § 1325(b)(1) and (2).

7. The Debtor's Amended Schedules "I" and "J" reflect the Debtor's current income as of this

date and the Debtor's current and reasonably expected future expenses in order to support the

terms of the Debtor's Third Amended Chapter 13 Plan.

WHEREFORE, the Debtor respectfully requests that the Court allow the further amendment

of his Summary of Schedules, Schedules "I" and "J", Statement of Current Monthly Income and

Chapter 13 Calculation of Net Disposable Income (i.e. Form 122C-1 and C-2) and Form 106Dec

and grant all other relief deemed just and proper.

ANDREW GREENHUT, Debtor

By his Attorney,

Date: 8/5/2020 /s/ Richard N. Gottlieb, Esq.

Richard N. Gottlieb, Esq. BBO# 547970

Law Offices of Richard N. Gottlieb

Ten Tremont Street Suite 11, 3<sup>rd</sup> Floor

Boston, MA 02108

(617) 742-4491

(017) 742-4471

rnglaw@verizon.net

# Exhibit "A"

Case 19-10782 Doc 206 Filed 08/05/20 Entered 08/05/20 10:46:45 Desc Main Document Page 5 of 24

Fill in this information to identify your case:				
Debtor 1	Andrew Greenhu	t		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		DISTRICT OF MASSAC	CHUSETTS	
Case number	19-10782			
(if known)				
	19-10782			

Check if this is an amended filing

# Official Form 106Sum

# of Your Assets and Liabilities and Certain Statistical Information

Su	mmary of Your Assets and Liabilities and Certain Statistical Information		12/15
info	s complete and accurate as possible. If two married people are filing together, both are equally responsible formation. Fill out all of your schedules first; then complete the information on this form. If you are filing amende original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.		
Par	11: Summarize Your Assets		
		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	75,727.63
	1c. Copy line 63, Total of all property on Schedule A/B	\$	75,727.63
Par	t2: Summarize Your Liabilities		
			abilities It you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	7,253.70
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	4,443.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	385,787.24
	Your total liabilities	\$	397,483.94
Par	Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	12,729.37
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	9,906.37
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other scl	hedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a personal.	, family, or
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this	box and s	ubmit this form to

the court with your other schedules.

Case 19-10782 Doc 206 Filed 08/05/20 Entered 08/05/20 10:46:45 Desc Main Document Page 6 of 24

Debtor 1 Andrew Greenhut Case number (if known) 19-10782

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$\_\_\_\_\_17,111.44

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total o	laim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	4,443.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	4,443.00

Fill in this informat	tion to identify your case:	
Debtor 1	Andrew Greenhut	
Debtor 2 (Spouse, if filing)		
United States Ban	skruptcy Court for the: DISTRICT OF MASSACHUSETTS	
Case number	19-10782	Check if this is:
(If known)		An amended filing
		A supplement showing postpetition chapter 13 income as of the following date:
Official Fo	<u>rm 106l</u>	MM / DD/ YYYY
<b>~</b> · · ·		

# Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

	Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
	If you have more than one job,		■ Employed	■ Employed
	attach a separate page with information about additional	Employment status	☐ Not employed	☐ Not employed
	employers.	Occupation	Product Manager	Human Resources Manager
	Include part-time, seasonal, or self-employed work.	Employer's name	DataRobot	Lincoln Institute of Land Policy
Occupation	Occupation may include student or homemaker, if it applies.	Employer's address	225 Franklin Street 13th Floor Boston, MA 02210	113 Brattle Street Cambridge, MA 02138
		How long employed the	nere? 1 Year, 1 Month	2 years

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 7,156.48 2. 13,666.66 2. deductions). If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. 3. 0.00 0.00 Calculate gross Income. Add line 2 + line 3. 13.666.66 7.156.48

Official Form 106I Schedule I: Your Income page 1

Deb	ebtor 1 Andrew Greenhut			Case number ( <i>if known</i> ) 19-10782					
					For Debtor 1		For Debtor		
	Cop	y line 4 here	4.		\$ 13,666.6	6	non-filing s	,156.48	
	·				- 10,00010	_	·	,	-
5.	List	all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a.		\$ 3,680.1 \$ 0.0	_		,876.31	-
	5b. 5c.	Mandatory contributions for retirement plans Voluntary contributions for retirement plans	5b. 5c.		\$		\$ \$	0.00 354.16	
	5d.	Required repayments of retirement fund loans	5d.		\$ 1,020.0	_	\$	0.00	-
	5e.	Insurance	5e.		\$ 319.0		\$	103.03	-
	5f.	Domestic support obligations	5f.		\$ 0.0	0	\$	0.00	
	5g.	Union dues	5g.		\$		\$	0.00	
	5h.	Other deductions. Specify: Transit deductions	_ 5h.		\$ 90.0	_	· :	0.00	-
		FSA	_		\$	U	\$	45.13	-
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	,	<b>5,715.1</b>	4_	\$2	,378.63	
7.	Calc	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	,	\$7,951.5	2_	\$4	,777.85	
8.		all other income regularly received:							
	8a.	Net income from rental property and from operating a business, profession, or farm							
		Attach a statement for each property and business showing gross							
		receipts, ordinary and necessary business expenses, and the total	0 -		Φ • • • • • • • • • • • • • • • • • • •	_	Φ.		
	8b.	monthly net income. Interest and dividends	8a. 8b.		\$ 0.0 \$ 0.0		\$	0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent			Ψ	_	Ψ	0.00	-
		regularly receive							
		Include alimony, spousal support, child support, maintenance, divorce	8c.		\$ 0.0	^	¢	0.00	
	8d.	settlement, and property settlement.  Unemployment compensation	8d.		\$\$ \$0.0	_	\$ \$	0.00	-
	8e.	Social Security	8e.		\$ 0.0	_	\$	0.00	-
	8f.	Other government assistance that you regularly receive				<u> </u>	·		-
		Include cash assistance and the value (if known) of any non-cash assistance	:						
		that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.							
		Specify:	8f.		\$ 0.0	0	\$	0.00	
	8g.	Pension or retirement income	8g.		\$ 0.0	_	\$	0.00	
	8h.	Other monthly income. Specify:	_ 8h.	+	\$	0 +	\$	0.00	-
9.	hhΔ	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.0	<b>n</b>	\$	0.00	,
٥.	Auu	rail other moonie. Add intes our obrost our our or or ogron.	٥.	L	0.0			0.00	
10	Calc	culate monthly income. Add line 7 + line 9.	10.	*	7,951.52 +	\$	4,777.85	= \$	12,729.37
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.			7,331.32	Ψ_	4,777.00		12,723.37
11	Stat	e all other regular contributions to the expenses that you list in Schedule						'	·
		ude contributions from an unmarried partner, members of your household, your		nde	ents, your roomma	ites,	and		
		er friends or relatives.	! _	L. I		1:-4-	alia Cabaalul	- 1	
	Spe	not include any amounts already included in lines 2-10 or amounts that are not a cify:	avalia	bie	to pay expenses	liste		e J. +\$	0.00
	·						_		
12.		the amount in the last column of line 10 to the amount in line 11. The res							
	appl	e that amount on the <i>Summary of Schedules</i> and <i>Statistical Summary of Certai</i> lies	n Liat	OIIITI	es and Related D	ата,	12.	\$ 1	12,729.37
								Combin	nod.
									y income
13.	Do y	you expect an increase or decrease within the year after you file this form	?					•	-
		No.							
		Yes. Explain:							

Fill	in this informa	tion to identify yo	our case:					
	otor 1	Andrew Gree	enhut				ck if this is: An amended filing	
1	otor 2 ouse, if filing)							wing postpetition chapter the following date:
Unit	ed States Bankr	ruptcy Court for the	: DISTRI	CT OF MASSACHUSETT	rs		MM / DD / YYYY	
Cas	e number 19	9-10782						
(If k	nown)							
Of	fficial Fo	rm 106J						
		J: Your						12/1
info	ormation. If m		eded, atta	If two married people a ch another sheet to this n.				
Par		ibe Your House	hold					
1.	Is this a join  No. Go to							
			in a separa	ate household?				
	□ N	0	-					
	□ Ye	es. Debtor 2 mus	st file Offici	al Form 106J-2, <i>Expense</i>	s for Separate House	ehold of Deb	otor 2.	
2.	Do you have	e dependents?	■ No					
	Do not list Do Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state dependents							□ No □ Yes
	acpondents	names.					_	□ No
								Yes
								□ No □ Yes
							_	□ No
3.	Do your ove	enses include	_					☐ Yes
J.	expenses of	f people other t d your depende	han 👝	No Yes				
exp	imate your ex		our bankrı	uptcy filing date unless				apter 13 case to report of the form and fill in the
the		n assistance an		government assistance luded it on <i>Schedule I:</i>			Your exp	enses
·		•	la in		La de da Casta a adama a			
4.		nd any rent for th		ses for your residence. r lot.	include first mortgage	e 4.	\$	2,450.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a.	\$	0.00
	•	rty, homeowner's				4b. 4c.	·	0.00
		maintenance, re owner's associat		ıpkeep expenses dominium dues		4c. 4d.	·	78.54 0.00
5.	Additional n	nortgage paym	ents for yo	our residence, such as he	ome equity loans	5.		0.00

Utilities:			
6a. Electricity, heat, natural gas	6a.	\$	203.10
6b. Water, sewer, garbage collection	6b.	\$	0.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	97.72
6d. Other. Specify: Fiancee's Cell Phone	6d.	\$	71.42
Food and housekeeping supplies		\$	947.44
Childcare and children's education costs	8.	\$	1,956.79
Clothing, laundry, and dry cleaning	9.	\$	183.86
Personal care products and services	10.	\$	215.93
Medical and dental expenses	11.	\$	312.06
<b>Transportation.</b> Include gas, maintenance, bus or train fare.			
Do not include car payments.	12.	\$	330.08
Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	151.87
Charitable contributions and religious donations	14.	\$	36.56
Insurance.			
Do not include insurance deducted from your pay or included in lines 4 or 20.			
15a. Life insurance	15a.	•	367.83
15b. Health insurance	15b.		0.00
15c. Vehicle insurance	15c.	\$	85.00
15d. Other insurance. Specify:	15d.	\$	0.00
<b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20.	_		
Specify: Vehicle Excise Tax	16.	\$	10.53
Installment or lease payments:			
17a. Car payments for Vehicle 1	17a.	\$	0.00
17b. Car payments for Vehicle 2	17b.	\$	0.00
17c. Other. Specify:	17c.	\$	0.00
17d. Other. Specify:	17d.	\$	0.00
Your payments of alimony, maintenance, and support that you did not report as		_	2.22
deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	· -	0.00
Other payments you make to support others who do not live with you.		\$	0.00
Specify:	19.		
Other real property expenses not included in lines 4 or 5 of this form or on Sche			
20a. Mortgages on other property	20a.		0.00
20b. Real estate taxes	20b.	•	0.00
20c. Property, homeowner's, or renter's insurance	20c.		0.00
20d. Maintenance, repair, and upkeep expenses	20d.		0.00
20e. Homeowner's association or condominium dues	20e.	·	0.00
Other: Specify: Expenses related to pet ownership	21.	+\$	156.52
Average Monthly Contrib. to 529 Plan by Non-Debtor Fiancee		+\$	625.00
Average Monthly Savings by Non-Debtor Fiancee		+\$	1,126.12
Average Monthly Contrib. to Roth IRA by Non-Debtor Fiancee	<del></del>	+\$	500.00
Calculate your monthly expenses			
22a. Add lines 4 through 21.		\$	9,906.37
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	0,000.01
		·	0.000.07
22c. Add line 22a and 22b. The result is your monthly expenses.		\$	9,906.37
Calculate your monthly net income.			
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	12,729.37
23b. Copy your monthly expenses from line 22c above.	23b.	-\$	9,906.37
			,
23c. Subtract your monthly expenses from your monthly income.	23c.	\$	2,823.00
The result is your monthly net income.	230.	Ψ	2,020.00
Do you expect an increase or decrease in your expenses within the year after yo			
For example, do you expect to finish paying for your car loan within the year or do you expect your	r mortgage p	payment to inc	rease or decrease because o
modification to the terms of your mortgage?			
□ No.			
■ Yes. Explain here: <b>See Line No. 46 on B122-C2</b>			

# Case 19-10782 Doc 206 Filed 08/05/20 Entered 08/05/20 10:46:45 Desc Main Document Page 11 of 24

Fill in this information to identify your case:				
Debtor 1	Andrew Greenhu	t		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for the:	DISTRICT OF MASSAC	CHUSETTS	
Case number	19-10782			
(if known)				

\_\_\_\_\_

# Official Form 106Dec

# **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

	Sign Below		
D	id you pay or agree to pay someone who is NOT an attorney t	o help	you fill out bankruptcy forms?
	I No		
	Yes. Name of person		Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
	der penalty of perjury, I declare that I have read the summary at they are true and correct.  /s/ Andrew Greenhut Andrew Greenhut Signature of Debtor 1	and s	chedules filed with this declaration and Signature of Debtor 2
	Date August 5, 2020		Date

Official Form 106Dec

Fill in this inform	Fill in this information to identify your case:				
Debtor 1	Andrew Greenhut				
Debtor 2 (Spouse, if filing)					
United States B	lankruptcy Court for the: District of Massachusetts				
Case number (if known)	19-10782				

Check as directed in lines 17 and 21:						
According to the calculations required by this Statement:						
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).					
•	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).					
	3. The commitment period is 3 years.					
	4. The commitment period is 5 years.					

■ Check if this is an amended filing

## Official Form 122C-1

# **Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

#### Part 1: **Calculate Your Average Monthly Income** 1. What is your marital and filing status? Check one only. □ Not married. Fill out Column A, lines 2-11. ■ Married. Fill out both Columns A and B, lines 2-11. Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column A Column B Debtor 1 Debtor 2 or non-filing spouse 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all 13,013.65 6,562.50 payroll deductions). Alimony and maintenance payments. Do not include payments from a spouse if 0.00 0.00 Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments 0.00 0.00 vou listed on line 3. 5. Net income from operating a business, Debtor 1 profession, or farm 0.00 Gross receipts (before all deductions) 0.00 Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 Net monthly income from a business, profession, or farm \$ 6. Net income from rental and other real property Debtor 1 0.00 Gross receipts (before all deductions) \$ -\$ 0.00 Ordinary and necessary operating expenses 0.00 0.00 Copy here -> \$ 0.00 Net monthly income from rental or other real property

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

Case 19-10782 Doc 206 Filed 08/05/20 Entered 08/05/20 10:46:45 Desc Main Document Page 13 of 24

Case number (if known)

19-10782

Column B Column A Debtor 2 or Debtor 1 non-filing spouse 68.11 0.00 7. Interest, dividends, and royalties 8. Unemployment compensation 0.00 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you\_\_\_\_ 0.00 For your spouse 0.00 9. Pension or retirement income. Do not include any amount received that was a 0.00 0.00 benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. Net stock sales 97.32 0.00 0.00 0.00 Total amounts from separate pages, if any. 0.00 \$ 0.00 11. Calculate your total average monthly income. Add lines 2 through 10 for 13,179.08 6,562.50 19,741.58 each column. Then add the total for Column A to the total for Column B. Total average monthly income Part 2: **Determine How to Measure Your Deductions from Income** 12. Copy your total average monthly income from line 11. 19,741.58 13. Calculate the marital adjustment. Check one: ☐ You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. Cohabitant's Monthly Retirement, Roth IRA and 1,626.12 **Cohabitant's Monthly Personal Debt Payments** 576.42 **Cohabitant's Monthly Personal Health Care** 282.60 Cohabitant's Monthly Personal Transport., Ins. & Pet 145.00 Exp. 2,630.14 2,630.14 Copy here=> 17,111.44 14. Your current monthly income. Subtract line 13 from line 12. 15. Calculate your current monthly income for the year. Follow these steps: 17,111.44 15a. Copy line 14 here=> Multiply line 15a by 12 (the number of months in a year). **x** 12 205.337.28 15b. The result is your current monthly income for the year for this part of the form.

**Andrew Greenhut** 

Case 19-10782 Doc 206 Filed 08/05/20 Entered 08/05/20 10:46:45 Desc Main Document Page 14 of 24

Case number (if known)

19-10782

16. Calculate the median family income that applies to you. Follow these steps: 16a. Fill in the state in which you live. MA 16b. Fill in the number of people in your household. 3 102.059.00 16c. Fill in the median family income for your state and size of household. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 17. How do the lines compare? Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Your Disposable Income (Official Form 122C-2). Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, Disposable income is determined under 11 U.S.C. § 17b. 1325(b)(3). Go to Part 3 and fill out Calculation of Your Disposable Income (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above. Calculate Your Commitment Period Under 11 U.S.C. § 1325(b)(4) Part 3: 18. Copy your total average monthly income from line 11. 19,741.58 Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13. 2,630.14 19a. If the marital adjustment does not apply, fill in 0 on line 19a. 17,111.44 19b. Subtract line 19a from line 18. \$ 20. Calculate your current monthly income for the year. Follow these steps: 17,111.44 20a. Copy line 19b Multiply by 12 (the number of months in a year). x 12 205,337.28 20b. The result is your current monthly income for the year for this part of the form 102,059.00 \$ 20c. Copy the median family income for your state and size of household from line 16c 21. How do the lines compare? Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period is 3 years. Go to Part 4. Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, The commitment period is 5 years. Go to Part 4. Part 4: Sign Below By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct. X /s/ Andrew Greenhut **Andrew Greenhut** Signature of Debtor 1 Date August 5, 2020 MM / DD / YYYY If you checked 17a, do NOT fill out or file Form 122C-2. If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

Debtor 1

**Andrew Greenhut** 

# Case 19-10782 Doc 206 Filed 08/05/20 Entered 08/05/20 10:46:45 Desc Main Document Page 15 of 24

Fill in this info	rmation to identify your case:	
Debtor 1	Andrew Greenhut	
Debtor 2 (Spouse, if filing	g)	
United States E	Bankruptcy Court for the: District of Massachusetts	
Case number (if known)	19-10782	■ Check if this is an amended filin

Official Form 122C-2

# **Chapter 13 Calculation of Your Disposable Income**

04/16

To fill out this form, you will need your completed copy of Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period (Official Form 122C-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form, Include the line number to which additional information applies. On the top any additional pages, write your name and case number (if known).

Part 1:

Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not include any operating expenses that you subtracted from income in lines 5 and 6 of Form 122C–1, and do not deduct any amounts that you subtracted from your spouse's income in line 13 of Form 122C–1.

If your expenses differ from month to month, enter the average expense.

Note: Line numbers 1-4 are not used in this form. These numbers apply to information required by a similar form used in chapter 7 cases.

5. The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

3

**National Standards** 

You must use the IRS National Standards to answer the questions in lines 6-7.

6. **Food, clothing, and other items:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

1,384.00

7. **Out-of-pocket health care allowance:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health car costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

Case 19-10782 Doc 206 Filed 08/05/20 Entered 08/05/20 10:46:45 Desc Main Document Page 16 of 24

Debtor 1 **Andrew Greenhut** Case number (if known) 19-10782 People who are under 65 years of age 7a. Out-of-pocket health care allowance per person 7b. Number of people who are under 65 3 7c. Subtotal. Multiply line 7a by line 7b. 156.00 Copy here=> \$ 156.00 People who are 65 years of age or older 7d. Out-of-pocket health care allowance per person 114 7e. Number of people who are 65 or older 0 7f. Subtotal. Multiply line 7d by line 7e. 0.00 Copy here=> 0.00 7g. Total. Add line 7c and line 7f 156.00 Copy total here=: 156.00 Local Standards You must use the IRS Local Standards to answer the questions in lines 8-15. Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts: Housing and utilities - Insurance and operating expenses Housing and utilities - Mortgage or rent expenses To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. Housing and utilities - Insurance and operating expenses: Using the number of people you entered in line 5, fill 697.00 in the dollar amount listed for your county for insurance and operating expenses. Housing and utilities - Mortgage or rent expenses: 9a. Using the number of people you entered in line 5, fill in the dollar amount 2,129.00 listed for your county for mortgage or rent expenses. 9b. Total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60. Name of the creditor Average monthly payment -NONE-\$ Сору Repeat this amount 0.00 9b. Total average monthly payment \$ 0.00 here=> on line 33a. 9c. Net mortgage or rent expense. Subtract line 9b (total average monthly payment) from line 9a (mortgage Copy 2,129.00 2,129.00 or rent expense). If this number is less than \$0, enter \$0. here=> 10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and 321.00 affects the calculation of your monthly expenses, fill in any additional amount you claim.

Explain why: Actual rent is \$2450 per month

Case 19-10782 Doc 206 Filed 08/05/20 Entered 08/05/20 10:46:45 Desc Main Document Page 17 of 24

Debtor 1	Andrew Greenhut				Case number (if	known) 19	9-10782	
11.	Local transportation expenses: Check the num	ber of vehic	les for whi	ch you claim a	an ownership	or operatir	ng expense.	
	☐ 0. Go to line 14.							
	☐ 1. Go to line 12.							
	■ 2 or more. Go to line 12.							
12.	Vehicle operation expense: Using the IRS Loca	l Standards	and the nu	umber of vehi	cles for which	n vou claim	the	
	operating expenses, fill in the Operating Costs that	at apply for	your Censi	ıs region or m	etropolitan s	tatistical ar	ea. \$	500.00
	<b>Vehicle ownership or lease expense:</b> Using the You may not claim the expense if you do not mak more than two vehicles.							
Veh	Describe Vehicle 1: 2015 Honda C				n based on			
13a.	Ownership or leasing costs using IRS Local Stand	dard			\$	497.00		
13b.	Average monthly payment for all debts secured by	y Vehicle 1.						
	Do not include costs for leased vehicles.							
	To calculate the average monthly payment here a are contractually due to each secured creditor in t bankruptcy. Then divide by 60.				t			
	Name of each creditor for Vehicle 1		Average payment	monthly				
	Rtn Federal Credit Union		\$	122.33				
	Total Average Monthly F	Payment	\$	122.33	Copy here => -	§12	Repeat this amount on line 33b.	
13c.	Net Vehicle 1 ownership or lease expense Subtract line 13b from line 13a. if this number is le	ess than \$0,	, enter \$0.		\$	374.67	Copy net Vehicle 1 expense here => \$	374.67
Veh	nicle 2 Describe Vehicle 2:							
13d.	Ownership or leasing costs using IRS Local Stand	dard			\$	0.00		
	Average monthly payment for all debts secured by leased vehicles.	/ Vehicle 2.	Do not inc	lude costs for				
	Name of each creditor for Vehicle 2		Average payment	monthly				
	-NONE-		_ \$					
	Total average monthly p	ayment	\$	0.00	Copy here => -\$	0.	Repeat this amount on line 33c.	
13f.	Net Vehicle 2 ownership or lease expense Subtract line 13e from line 13d. if this number is le	ess than \$0,	, enter \$0.		\$	0.00	Copy net Vehicle 2 expense here => \$	0.00
14.	Public transportation expense: If you claimed Public Transportation expense allowance rega						in the \$	0.00
	Additional public transportation expense: If yo also deduct a public transportation expense, you not claim more than the IRS Local Standard for P	may fill in w	hat you be					84.50

Case 19-10782 Doc 206 Filed 08/05/20 Entered 08/05/20 10:46:45 Desc Main Document Page 18 of 24

Debtor 1 Andrew Greenhut Case number (if known) 19-10782

	er Necessary Expenses	In addition to the expense of the following IRS categorie		, you are allowed your monthly expenses	for			
16.	<b>Taxes:</b> The total monthly amount that you will actually pay for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes.  Do not include real estate, sales, or use taxes.			\$	6,461.61			
17.	Involuntary deductions: The total monthly payroll deductions that your job requires, such as retirement							
	contributions, union dues, a		oh euch as voluntary 1	01(k) contributions or payroll savings.	\$	0.00		
18.		, , ,	•	.,	· –			
	<b>Life Insurance:</b> The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance.  Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term.				\$_	41.74		
19.		The total monthly amount the		by the order of a court or				
	• •	n as spousal or child suppor		You will list these obligations in line 35.	\$	319.83		
20.		hly amount that you pay for			. –			
_0.	as a condition for your j	, , ,						
	for your physically or me	entally challenged dependen	nt child if no public educ	ation is available for similar services.	\$	0.00		
21.	Childcare: The total month	ly amount that you pay for c	childcare, such as babys	sitting, daycare, nursery, and preschool.				
	Do not include payments for	or any elementary or second	ary school education.		\$_	0.00		
22.	that is required for the heal		r dependents and that is	amount that you pay for health care s not reimbursed by insurance or paid al entered in line 7.		0.00		
	•	nce or health savings accou		•	\$_	0.00		
23.	23. Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122C-1, or any amount you previously deducted.				+\$_	97.92		
24.	Add all of the expenses a Add lines 6 through 23.	llowed under the IRS expe	ense allowances.	24. Add all of the expenses allowed under the IRS expense allowances.  Add lines 6 through 23				
	· ·				1			
Add	litional Expense Deduction		deductions allowed by the any expense allowances					
	Health insurance, disabil	Note: Do not include a ty insurance, and health s	any expense allowances avings account exper		r			
	Health insurance, disabil insurance, disability insurance	Note: Do not include a ty insurance, and health s	any expense allowances avings account exper	s listed in lines 6-24.  ses. The monthly expenses for health	r			
	Health insurance, disabil insurance, disability insurary your dependents.	Note: Do not include a ty insurance, and health s	any expense allowances savings account exper ounts that are reasonab	s listed in lines 6-24.  ses. The monthly expenses for health	r			
	Health insurance, disabilinsurance, disability insurance, your dependents. Health insurance	Note: Do not include a ty insurance, and health s nce, and health savings according	any expense allowances avings account exper ounts that are reasonab  \$86.71_	s listed in lines 6-24.  ses. The monthly expenses for health	r			
	Health insurance, disabilinsurance, disability insurance your dependents. Health insurance Disability insurance	Note: Do not include a ty insurance, and health s nce, and health savings according	savings account experounts that are reasonab  \$ 86.71 \$ 0.00	s listed in lines 6-24.  ses. The monthly expenses for health	r \$\$	378.38		
	Health insurance, disabilinsurance, disability insurance your dependents. Health insurance Disability insurance Health savings account	Note: Do not include a ty insurance, and health s nce, and health savings acco	savings account experounts that are reasonab  \$ 86.71 \$ 0.00 + \$ 291.67	s listed in lines 6-24.  nses. The monthly expenses for health bly necessary for yourself, your spouse, o		378.38		
	Health insurance, disabilinsurance, disability insurance your dependents. Health insurance Disability insurance Health savings account Total	Note: Do not include a ty insurance, and health snce, and health savings according to the saving	savings account experounts that are reasonable \$\\ \text{86.71} \\ \text{0.00} \\ \text{\$291.67} \\ \text{\$378.38}	s listed in lines 6-24.  nses. The monthly expenses for health bly necessary for yourself, your spouse, o		378.38		
	Health insurance, disabilinsurance, disability insurance your dependents. Health insurance Disability insurance Health savings account Total  Do you actually spend this	Note: Do not include a ty insurance, and health snce, and health savings according to the saving	savings account experounts that are reasonab  \$ 86.71 \$ 0.00 + \$ 291.67	s listed in lines 6-24.  nses. The monthly expenses for health bly necessary for yourself, your spouse, o		378.38		
25.	Health insurance, disabilinsurance, disability insurance, disability insurance your dependents.  Health insurance Disability insurance Health savings account  Total  Do you actually spend this No. How much do your yes  Continued contributions continue to pay for the reasyour household or member	Note: Do not include a sty insurance, and health some, and health savings according to the care of household of conable and necessary care.	savings account experounts that are reasonable \$\\ 86.71 \\ 0.00 \\ \+ \\$ \ 291.67 \\ \$\\ 378.38 \\ \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	copy total here=>  e actual monthly expenses that you will rly, chronically ill, or disabled member of such expenses. These expenses may		378.38		
25.	Health insurance, disabilinsurance, disabilinsurance, disability insurance your dependents.  Health insurance Disability insurance Health savings account  Total  Do you actually spend this No. How much do your yes  Continued contributions continue to pay for the reasyour household or member include contributions to an Protection against family	Note: Do not include a ty insurance, and health since, and health savings accordance, and health savings accordance.  Itotal amount?  Ito the care of household operated and necessary care of your immediate family what account of a qualified ABLE violence. The reasonably notes in the same of th	savings account experiounts that are reasonable \$\\ 86.71 \\ \ 0.00 \\ + \ 291.67 \\ \$\\ 378.38 \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	copy total here=>  e actual monthly expenses that you will rly, chronically ill, or disabled member of such expenses. These expenses may	\$			

Case 19-10782 Doc 206 Filed 08/05/20 Entered 08/05/20 10:46:45 Desc Main Document Page 19 of 24

otor 1	Andrew Greennut		Case number (if known				
	Additional home energy costs. Your homine 8.	e energy costs are included in your insu	rance and operating	g expenses	s on		
	f you believe that you have home energy c B, then fill in the excess amount of home er		y costs included in e	expenses o	n line		
	You must give your case trustee document amount claimed is reasonable and necessa		nust show that the a	additional		\$	0.0
\$			n who are younger than 18. The monthly expenses (not modent children who are younger than 18 years old to attend				
	ou must give your case trustee document claimed is reasonable and necessary and r		must explain why the	e amount			
*	Subject to adjustment on 4/01/19, and ever	ery 3 years after that for cases begun on	or after the date of	adjustmen	t.	\$	0.0
r	Additional food and clothing expense. Thigher than the combined food and clothing han 5% of the food and clothing allowance	allowances in the IRS National Standar					
	Fo find a chart showing the maximum addit nstructions for this form. This chart may als			arate			
١	ou must show that the additional amount of	claimed is reasonable and necessary.				\$	46.00
	Continuing charitable contributions. The nstruments to a religious or charitable orga		ute in the form of ca	ash or finar	ncial		
[	Do not include any amount more than 15%	of your gross monthly income.				\$	56.50
22 /	Add all of the additional expense deductions.  Add lines 25 through 31.					\$	480.94
	Add lines 25 through 31.						
P	ctions for Debt Payment						
Dedu 33. Fo	Ţ.		ome mortgages, ve	ehicle			
Dedu 33. Fo lo	ctions for Debt Payment or debts that are secured by an interest	33a through 33e. ent, add all amounts that are contractual					
Dedu 33. Fo lo	ctions for Debt Payment or debts that are secured by an interest ans, and other secured debt, fill in lines o calculate the total average monthly paym	33a through 33e. ent, add all amounts that are contractual					e monthly
Dedu 33. Fo lo To	ctions for Debt Payment or debts that are secured by an interest ans, and other secured debt, fill in lines o calculate the total average monthly paym editor in the 60 months after you file for ba Mortgages on your home	33a through 33e. ent, add all amounts that are contractual nkruptcy. Then divide by 60.	lly due to each secu	ired		Average paymen	
Peduc 33. Fo lo To	ctions for Debt Payment or debts that are secured by an interest ans, and other secured debt, fill in lines o calculate the total average monthly paym editor in the 60 months after you file for ba  Mortgages on your home  Copy line 9b here	33a through 33e. ent, add all amounts that are contractual nkruptcy. Then divide by 60.	lly due to each secu	ired	F		t
Deduction To cress 33a.	ctions for Debt Payment or debts that are secured by an interest ans, and other secured debt, fill in lines o calculate the total average monthly paym editor in the 60 months after you file for ba Mortgages on your home  Copy line 9b here Loans on your first two vehicles	a33a through 33e. ent, add all amounts that are contractual nkruptcy. Then divide by 60.	lly due to each secu	ired	F		t
Pedudis Formand Forman	ctions for Debt Payment or debts that are secured by an interest ans, and other secured debt, fill in lines o calculate the total average monthly paym editor in the 60 months after you file for ba  Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here	33a through 33e. ent, add all amounts that are contractual nkruptcy. Then divide by 60.	lly due to each secu	ıred	=> \$		0.00
33. Fo lo To cris 33a. 33b. 33c.	ctions for Debt Payment or debts that are secured by an interest ans, and other secured debt, fill in lines o calculate the total average monthly paym editor in the 60 months after you file for ba  Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here  Copy line 13e here	a33a through 33e. ent, add all amounts that are contractual nkruptcy. Then divide by 60.	lly due to each secu	ıred	=> \$		0.00
Deduu 333. Fo lo To cr 333a.	ctions for Debt Payment or debts that are secured by an interest ans, and other secured debt, fill in lines o calculate the total average monthly paym editor in the 60 months after you file for ba  Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here	33a through 33e. ent, add all amounts that are contractual nkruptcy. Then divide by 60.	lly due to each secu	ıred	=> \$ => \$ => \$ => \$		0.00
Pedural San February San	ctions for Debt Payment or debts that are secured by an interest ans, and other secured debt, fill in lines or calculate the total average monthly paym editor in the 60 months after you file for bat Mortgages on your home  Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts:	33a through 33e. ent, add all amounts that are contractual nkruptcy. Then divide by 60.	lly due to each secu	pes payme clude taxes insurance	=> \$ => \$ => \$ => \$		0.00
7. Peducia 3. For lo con con con con con con con con con co	ctions for Debt Payment or debts that are secured by an interest ans, and other secured debt, fill in lines or calculate the total average monthly paym editor in the 60 months after you file for bat Mortgages on your home  Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts:	33a through 33e. ent, add all amounts that are contractual nkruptcy. Then divide by 60.	Ily due to each secu	pes payme clude taxes insurance	=> \$ => \$ => \$ => \$	\$\$	0.00
33. Fc lo Tc cr. 33a. 35b. 35c. 33d.	ctions for Debt Payment or debts that are secured by an interest ans, and other secured debt, fill in lines o calculate the total average monthly paym editor in the 60 months after you file for ba Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here  Copy line 13e here  List other secured debts: e of each creditor for other secured debt	33a through 33e. ent, add all amounts that are contractual nkruptcy. Then divide by 60.	t Do	pes payme clude taxes insurance I No I Yes	=> \$ \$ => \$ \$ and \$ \$ ?	\$\$	0.00
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Pedural San February San	ctions for Debt Payment or debts that are secured by an interest ans, and other secured debt, fill in lines o calculate the total average monthly paym editor in the 60 months after you file for ba Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here  Copy line 13e here  List other secured debts: e of each creditor for other secured debt	33a through 33e. ent, add all amounts that are contractual nkruptcy. Then divide by 60.	t Do	oes payme clude taxes insurance I No I Yes I No I Yes	=> \$ \$ => \$ \$ and \$ \$ ?	S	0.00
Pedural San February San	ctions for Debt Payment or debts that are secured by an interest ans, and other secured debt, fill in lines o calculate the total average monthly paym editor in the 60 months after you file for ba Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here  Copy line 13e here  List other secured debts: e of each creditor for other secured debt	33a through 33e. ent, add all amounts that are contractual nkruptcy. Then divide by 60.	t Do	pes payme clude taxes insurance I No I Yes I No I Yes	=> \$ => \$ => \$	S	0.00
33. Fc lo Tc cr. 333a. 335b. 333c. 333d.	ctions for Debt Payment or debts that are secured by an interest ans, and other secured debt, fill in lines o calculate the total average monthly paym editor in the 60 months after you file for ba Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here  Copy line 13e here  List other secured debts: e of each creditor for other secured debt	33a through 33e. ent, add all amounts that are contractual nkruptcy. Then divide by 60.	t Do	pes payme clude taxes insurance I No I Yes I No I Yes I No I Yes I No	=> \$ => \$ => \$	\$\$	0.00

Case 19-10782 Doc 206 Filed 08/05/20 Entered 08/05/20 10:46:45 Desc Main Document Page 20 of 24

Debtor 1 Andrew Greenhut Case number (if known) 19-10782 34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents? No. Go to line 35. ☐ Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the cure amount). Next, divide by 60 and fill in the information below. Name of the creditor Identify property that secures the debt Total cure amount Monthly cure amount  $\div 60 = \$$ -NONE-Сору total 0.00 0.00 Total here=> 35. Do you owe any priority claims - such as a priority tax, child support, or alimony - that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507. ☐ No. Go to line 36. Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19. Total amount of all past-due priority claims 4,443.00 ÷ 60 74.05 36. Projected monthly Chapter 13 plan payment 2,436.00 Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by 10.00 the Executive Office for United States Trustees (for all other districts). To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. Copy total 243.60 243.60 here=> \$ Average monthly administrative expense 439.98 37. Add all of the deductions for debt payment. Add lines 33e through 36. **Total Deductions from Income** 38. Add all of the allowed deductions. Copy line 24, All of the expenses allowed under IRS 12,567.27 expense allowances Copy line 32, All of the additional expense deductions 480.94 Copy line 37, All of the deductions for debt payment 439.98 +\$ 13,488.19 13.488.19 Total deductions..... Copy total here=>

Case 19-10782 Doc 206 Filed 08/05/20 Entered 08/05/20 10:46:45 Desc Main Document Page 21 of 24

**Andrew Greenhut** Debtor 1 Case number (if known) 19-10782 Determine Your Disposable Income Under 11 U.S.C. § 1325(b)(2) Part 2: 39. Copy your total current monthly income from line 14 of Form 122C-1, Chapter 13 17.111.44 Statement of Your Current Monthly Income and Calculation of Commitment Period. 40. Fill in any reasonably necessary income you receive for support for dependent children. The monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part I of Form 122C-1, that you received in accordance with applicable nonbankruptcy law to the extent reasonably 0.00 necessary to be expended for such child. 41. Fill in all qualified retirement deductions. The monthly total of all amounts that your employer withheld from wages as contributions for qualified retirement plans, as specified in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, as 1,583.33 specified in 11 U.S.C. § 362(b)(19). 42. Total of all deductions allowed under 11 U.S.C. § 707(b)(2)(A). Copy line 38 here => 13,488.19 43. Deduction for special circumstances. If special circumstances justify additional expenses and you have no reasonable alternative, describe the special circumstances and their expenses. You must give your case trustee a detailed explanation of the special circumstances and documentation for the expenses. Describe the special circumstances Amount of expense Copy 0.00 0.00 Total | \$ here=> \$ Copy 44. **Total adjustments.** Add lines 40 through 43. 15.071.52 15,071.52 here=> -\$ 2.039.92 45. Calculate your monthly disposable income under § 1325(b)(2). Subtract line 44 from line 39. Part 3: Change in Income or Expenses 46. Change in income or expenses. If the income in Form 122C-1 or the expenses you reported in this form have changed or are virtually certain to change after the date you filed your bankruptcy petition and during the time your case will be open, fill in the information below. For example, if the wages reported increased after you filed your petition, check 122C-1 in the first column, enter line 2 in the second column, explain why the wages increased, fill in when the increase occurred, and fill in the amount of the increase. Form I ine Reason for change Date of change Increase or Amount of change decrease? 122C-1 Birth of Child-Monthly payment for § Increase 19a 529 Program for Child 12/1/2020 500.00 ■ 122C-2 □ Decrease Birth of Child-Additional Monthly ■ 122C-1 Increase **Insurance Premium based on Addition** 122C-2 18 12/1/2020 ☐ Decrease to Family 120.00 Birth of Child-Additional monthly ☐ 122C-1 Increase amount for baby sitting and child-care 122C-2 21 12/1/2020 ☐ Decrease 474.00 after birth of child ☐ Increase ☐ 122C-1 ■ 122C-2 ☐ Decrease

Case 19-10782 Doc 206 Filed 08/05/20 Entered 08/05/20 10:46:45 Desc Main Document Page 22 of 24

Debtor 1	Andrew Greenhut	Case number (if known)	19-10782
Part 4:	Sign Below		
Е	By signing here, under penalty of perjury you declare that the info	ormation on this statement and in any att	achments is true and correct.
X	/s/ Andrew Greenhut		
	Andrew Greenhut Signature of Debtor 1		
	August 5, 2020 MM/DD /YYYY		

# UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF MASSACHUSETTS

In re ANDREW GREENHUT, Debtor IN PROCEEDINGS UNDER CHAPTER 13 CASE NO.: 19-10782

#### **CERTIFICATE OF SERVICE**

I, Richard N. Gottlieb, Esq., do hereby certify that I have this day served a copy of the Motion of Debtor to Amend Summary of Schedules, Schedules "I" and "J", Statement of Current Monthly Income and Chapter 13 Calculation of Net Disposable Income (i.e. Form 122C-1 and C-2) and Form 106Dec and a copy of the Debtor's Amended Summary of Schedules, Amended Schedules "I" and "J", Amended Statement of Current Monthly Income and Chapter 13 Calculation of Net Disposable Income (i.e. Form 122C-1 and C-2) and Amended Form 106Dec, by First-Class Mail Postage Paid and/or electronically via the CM/ECF Electronic Messaging System on the persons listed below.

Date: August 5, 2020 /s/ Richard N. Gottlieb, Esq.

Richard N. Gottlieb, Esq. BBO # 547970 Law Offices of Richard N. Gottlieb Ten Tremont Street Suite 11, 3<sup>rd</sup> Floor Boston, Massachusetts 02108 (617) 742-4491 rnglaw@verizon.net

#### PERSONS SERVED:

Carolyn Bankowski, Esq. Chapter 13 Trustee (Served via CM/ECF) Alex Mattera, Esq.
Pierce Atwood, LLP
Counsel to Gita Srivastava
(Served via CM/ECF)

### **Barclays Bank Delaware**

Attn: Correspondence Po Box 8801 Wilmington, DE 19899 Capital One Attn: Bankruptcy

Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

#### **Chase Card Services**

Correspondence Dept Po Box 15298 Wilmington, DE 19850

### **Christopher and Andrea Haas**

164R Summer Street Arlington, MA 02474

### Gloria and Alan Greenhut

1560 45th Street Brooklyn, NY 11219

#### **Internal Revenue Service**

P.O. Box 7346 Philadelphia, PA 19101-7346

### Mass. Dept. of Revenue

P.O. Box 9564 Boston, MA 02204

#### **RTN Federal Credit Union**

600 Main St Waltham, MA 02452